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SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

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PRACTICE LIMITED TO FEDERAL PATENT,
TRADEMARK AND COPYRIGHT MATTERS**FACSIMILE TRANSMISSION****Date:** June 21, 2005**Pages:** 30 (including this page)**From:** Cynthia K. Nicholson**To:** USPTO**Fax No.:** 703-872-9306**Subject:** Amendment**Comments:**

Applicant: Lee	Serial No.: 09/460,806
Filing Date: 12/15/1999	Atty Dkt.: 113708.123

Title: FEE TRANSACTION SYSTEM AND METHOD FOR INTELLECTUAL PROPERTY ACQUISITION AND/OR MAINTENANCE**Attached please find:**

- (1) Transmittal form;
- (2) Petition for Extension of Time (2 months);
- (3) Fee Transmittal form; and
- (4) 26-page Amendment

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****Notice****

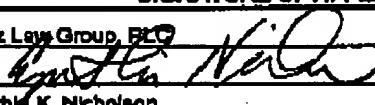
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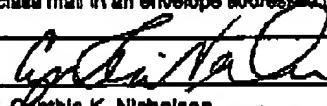
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	09/460,806
		Filing Date	12/15/1999
		First Named Inventor	Lee
		Art Unit	3829
		Examiner Name	Jonathan P. Ouellette
Total Number of Pages in This Submission		Attorney Docket Number	113708.123

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Pozz Law Group, PLLC		
Signature			
Printed name	Cynthia K. Nicholson		
Date	21 June 2005	Reg. No.	36,880

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Cynthia K. Nicholson		Date 21 June 2005

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number	09/480,806
Fee Transmittal For FY 2005		Filing Date	12/14/1999
		First Named Inventor	Lee
		Examiner Name	Jonathan P. Oulette
<input checked="" type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit	3629
TOTAL AMOUNT OF PAYMENT (6) 225		Attorney Docket No.	113708.123
METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-1147 Deposit Account Name: Poaz Law Group, PLC			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	EXAMINATION FEES
		Small Entity	Small Entity
Application Type	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	200
Design	200	100	130
Plant	200	100	180
Reissue	300	150	600
Provisional	150	80	0
		Fee (\$)	Fee (\$)
		Fee (\$)	Fee (\$)
		Fee (\$)	Fee (\$)
		Fee (\$)	Fee (\$)
		Fee (\$)	Fee (\$)
2. EXCESS CLAIM FEES			
Fee Description			
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent			
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent			
Multiple dependent claims			
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	-	-
HP = highest number of total claims paid for, if greater than 20			
Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	-	-
HP = highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (for small entity)			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
- 100 =	/ 50 =	(round up to a whole number) x	Fee Paid (\$)
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			
Other, Petition for Extension (2 months, small entity) _____			
225			
SUBMITTED BY			
Signature	Cynthia K. Nicholson		Registration No. (Attorney/Agent) 36,850
Name (Print/Type)	Cynthia K. Nicholson		Telephone (703) 707-9110
			Date 21 June 2005